## FORM D

1316752

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

OMB APPROVAL

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form......1

Si Prefix	USE ONL	Y Serial
DA	E RECEIV	ED

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION B.

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

AUG 2 8 2007

			182		
Name of Offering ( check if this is an					
Warrant to Purchase Series B Preferred S	tock and the underlying shares of o	capital stock of the Issu			
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	<b>⊠</b> Rule 506	☐ Section 4(6)	☐ ULOE
Type of Filing:		New Filing		Amendment	
	A. BASIC	IDENTIFICATION	DATA		
1. Enter the information requested abo	ut the issuer	-		131111 4831 1111	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Name of Issuer ( chec c if this is an am	endment and name has changed, a	and indicate change.)			
Pivot3, Inc.					
Address of Executive Offices	(Number and Stre	et, City, State, Zip Cod	e) Telephone Number	(Inch	7076622
6605 Cypresswood Drive, Suite 350, Spr	ing, Texas 77379		(281) 516-6001		
Address of Principal Business Operations	(Number and Street, City, State,	Zip Code)	Telephone Number	(Including Area Code	;)
(if different from Executive Offices)			Same		
Same					DDACECCE
Brief Description of Business Research and development of semicondu	ctor and software solutions				PROCESSE
Type of Business Organization					CED 0 5 0003
corporation	☐ limited partnership, already	formed		other (please specif	y): SEP 0 5 2007
□ business trust	☐ limited partnership, to be fo	rmed		,	THOMSON
	<u> </u>	Month	Year		FINANCIAL
Actual or Estimated Date of Incorporation	n or Organization:	11	02		☐ Estimated
	tion: (Enter two-letter U.S. Pos	etal Camina abbreviatio		Actual	LI Estimated
Jurisdiction of Incorporation or Organiza	CN for Canada; FN for o			•	DE

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice mus be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printe I signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE rust file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check	☐ Promoter	■ Beneficial Owner	<b>⊠</b> Executive Officer	☑ Director	☐ General and/or
Box(es) that Apply:					Managing Partner
	t name first, if individual)		<u></u>	<u></u>	
Caswell, Lee	·				
	sidence Address (Number and				
-	, 6605 Cypresswood Drive, Su			☑ Director	General and/or
Check Box(es) that	☐ Promoter	Beneficial Owner	☐ Executive Officer	E Director	Managing Partner
Apply:					
Full Name (Las	t name first, if individual)	· · · · · · · · · · · · · · · · · · ·			
Eggers, Barry					· · · · · · · · · · · · · · · · · · ·
	sidence Address (Number and S	Street, City, State, Zip Code) Iill Road, Menlo Park, CA 9402	25		
Check Boxes	Pro noter	Beneficial Owner	Executive Officer	Director	☐ General and/or
that Apply:	Li Fio notei	E3 Denencial Owner	E Enough of Office		Managing Partner
Full Name (Las	t name first, if individual)				
O'Brien, Eric					
Business or Res	sidence A idress (Number and	Street, City, State, Zip Code)	ne		
Check Boxes		Hill Road, Menlo Park, CA 9402  ■ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or
that Apply:	☐ Pro noter	Benencial Owner	Li Executive Officer	e Director	Managing Partner
Full Name (Las	t name first, if individual)		·		
Westerlind, Vic	tor				
	sidence A ldress (Number and				
		Floor, Menlo Park, CA 94025	Executive Officer	☑ Director	☐ General and/or
Check Boxes that Apply:	☐ Pro noter	■ Beneficial Owner	LI Executive Officer	E Director	Managing Partner
	t name first, if individual)			<del></del>	
Nash, Ronald	· · · · · · · · · · · · · · · · · · ·				
	sidence A Idress (Number and		<del></del>		
		<sup>nd</sup> Floor, Menlo Park, CA 94025		(2) - 1	☐ General and/or
Check Boxes that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Partner
	t name first, if individual)	· · · · · · · · · · · · · · · · · · ·			
Galloway, Will					
	sidence Address (Number and	Street, City, State, Zip Code)	<u> </u>	<del>-</del>	
c/o Pivot3, Inc.	, 6605 Cypresswood Drive, Su				
Check Boxes	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
that Apply:		All V			Managing Partner
	st name first, if individual) ed with Lightspeed Venture Pa	rtners			
	sidence Address (Number and		······································	, <u>,</u>	····
2200 Sand Hill	Road, Menlo Park, CA 94025			**	
Check	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Box(es) that Apply:					Managing Partner
	st name first, if individual)	· · · · · · · · · · · · · · · · · · ·			
,	ed with In erWest Partners			•	
	sidence Aildress (Number and				
2710 Sand Hill	Rd., 2nd Floor, Menlo Park, C.	A 94025			

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive of ficer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - · Each general and managing partner of partnership issuers.

		· ·			
Check Box(es) that Apply:	☐ Premoter	■ Beneficial Owner	E Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Las Callison, Ryan	t name fi st, if individual)				
	sidence Address (Number and , 6605 Cypresswood Drive, Su	Street, City, State, Zip Code) atte 350, Spring, Texas 77379			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Las Fernander, Rob	t name first, if individual) ert				-
	sidence Address (Number and , 6605 Cypresswood Drive, Su				
Check Boxes that Apply:	☐ Promoter	🗷 Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Las Skidmore, Alan	t name first, if individual)				
	sidence Address (Number and Oak Way, Spring, Texas 773				
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Las	t name first, if individual)	. ,			<del></del>
	sidence Address (Number and , 6605 Cypresswood Drive, Su				
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Las Bell, Jeffrey	t name first, if individual)				
	sidence Address (Number and , 6605 Cypresswood Drive, St				
Check Boxes that Apply:	☐ Pro noter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Las Gluck, Mike	t name first, if individual)				
	sidence A Idress (Number and , 6605 Cypresswood Drive, Su				
Check Boxes that Apply:	☐ Pro noter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Business or Re	sidence A Idress (Number and	Street, City, State, Zip Code)	•		
Check Box(es) that Apply:	☐ Pro noter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Business or Re	sidence A ldress (Number and	1 Street, City, State, Zip Code)	<u> </u>		

	-	•		В	. INFORM	ATION AB	OUT OFFE	RING		_	_	
ı.	Has the issuer solo	d. or does the iss	suer intend to					under ULOE			Yes N	o <u>X</u>
2.	What is the minin	nım investment	that will be a	ccepted from	n any indivi	idual?			,		\$ <u>N/A</u>	<del></del>
3.	Does the offering permit joint ownership of a single unit?											
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A												
Full l	Name (Last name	first, if individu	ai)		<del></del>							
Busin	ness or Residence	Address (Numb	er and Street,	City, State,	Zip Code)							
Nam	e of Associated Br	roker or Dealer	<u>-</u>						<del></del>			- <u>, -</u>
	s in Which Person							<u>-</u>	<u> </u>			
(Che	ck "All States" or	check individua	d States)									All States
ļALJ	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	(ID)
IIL	INI	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	MN	[MS]	[MO]
[MT]	I INEI	ĮNVĮ	[NH]	ונאן	INM	[NY]	[NC]	INDI	ЮН	JOKJ	<b>JORJ</b>	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Fuli	Name (Last name	fi <sup>-</sup> st, if individu	al)									
Busi	ness or Residence	Address (Numb	er and Street,	City, State	Zip Code)		-			<u> </u>		_
Nam	e of Associated Br	ro'cer or Dealer							<u>.</u>			·
State	s in Which Person	Listed Has Sol	icited or Inten	ds to Solici	t Purchasers	3	•			·		
(Che	ck "All States" or	check individua	ıl States)	•••••								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	HII	[ID]
IIL	[IN]	ĮΙΑΙ	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	IMOI
[MT]	[NE]	INVI	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	ЮНІ	OK	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	ΙΨVΙ	[WI]	[WY]	[PR]
Full	Name (Last name	first, if individu	al)	<del></del>								
Busi	ness or Residence	Address (Numb	er and Street,	City, State	, Zip Code)							
Name of Associated Broker or Dealer												
State	s in Which Person	Listed Has Sol	icited or Inter	nds to Solici	t Purchasers	Š	•••					
(Check "All States" or cl eck individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	<b>[CT]</b>	[DE]	[DC]	(FL)	[GA]	HI]	[ID]
[IL]	[IN]	[[A]]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	] [NE]	[NV]	[NH]	ĮNJĮ	[NM]	[NY]	[NC]	[ND]	[ОН]	[OK]	[OR]	[PA]
(RII	[SC]	[SD]	[TN]	įΤХĮ	[UT]	[VT]	[VA]	[VA]	ĮΨVĮ	ĮWΙ	[WY]	(PR)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price Sold 0 0 Debt ..... Equity ..... ☐ Preferred Common \$ 40,042.29 Convertible Securities (including warrants)..... Partne ship Interests.... \$ 0 Other (Specify \_\_\_\_\_) To al..... **S** 40,042.29 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Dollar Amount Investors of Purchases Accrec ited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. N/A Type of **Dollar Amount** Security Sold Type of Offering Rule 505..... Regulation A..... Rule 504..... Total .....

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees		<b>s</b>	
Printing and Engraving Costs		\$	
Legal Fees	×	<b>\$</b>	5,000
Accounting Fees		\$	
Engineering Fees.		\$	
Sales Commissions (specify finders' fees separately)		\$	
Other Expenses (Identify)		s	
Total	×	s	5,000

Salaries and focs	PROCEEDS	
If the associate for any purpose is not known, firmich an estimate and check the box to the left of the estimate, pays sents listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C Question 4.9 where the pays sent listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C Question 4.9 where the pays set of the estate.    Selection of each estate     Selection     S	counces framished	35.042.29
Paymetase of seal estate	The total of the	
Purchase, rental or leasing and installation of machinery and equipment.    S	ns to Officers, rs, & Affiliates	Payment To Others
Purchase, rental or leasing and installation of machinery and aquipment	🗆 :	
Purchase, rental or leasing and installation of machinery and aquipment		
Construction or leasing of plant buildings and facilities		<u> </u>
Acquisitio 1 of other businesses (including the value of securities involved in this offering that may be used in exchange for the agents or securities of another issuer pursuant to a marger).    S		
Working capital  Other (specify):  U.S.  Column To als.  Total Payra sats Listed (column totals added).  D. FEDERAL SIGNATURE  The issuer in d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed und an undertaking by the issuer to furnish to the U.S. Securities and Enchange Commission, upon written sequest of its staff non-accredited is twester payrament to paragraph (b)(2) of Rule 502.  Issuer (Print (r Type)	<table-cell-rows></table-cell-rows>	
Other (specify):    Column To als:   Column To als:   Total Payns max Listed (column totals added).   D. PEDERAL SIGNATURE   Payns max Listed (column totals added).   D. PEDERAL SIGNATURE	🗅 :	
Column To als.  Total Payra sets Listed (column totals added).  D. PEDITIAL SIGNATURE  The issuer is d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filled und an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written sequest of its staff non-accredited investor personnt to paragraph (b)(2) of Rule 502.  Issuer (Print or Type)	<b>B</b> :	35.042.29
Column To als.  Total Payra sets Listed (column totals added)  D. FEDERAL SIGNATURE  The issuer in d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed und an undertaking by the issuer to furnish to the U.S. Socurities and Exchange Commission, upon written sequest of its staff non-accredite d investor pursuant to paragraph (b)(2) of Rule 502.  Issuer (Print or Type)	O:	i
Total Payra sets Listed (column totals added)  D. PEDERAL SIGNATURE  The issuer is d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filled under undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written sequest of its staff non-accredited investor personnt to paragraph (b)(2) of Rule 502.  Issuer (Print or Type)	D;	
Total Payra mas Listed (column totals added)  D. PEDKRAL SIGNATURE  The issuer in d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed und on undertaking by the issuer to furnish to the U.S. Securities and Enchange Commission, upon written sequest of its staff non-accredite d investor pursuant to pur	20 2	
The issuer in d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filled under undertaking by the issuer to furnish to the U.S. Scentiles and Euchange Commission, upon written sequent of les staff non-accredite d investor pursuant to paragraph (b)(2) of Rule 502.  Signature  Signature	\$35,042.29	
The issuer in d duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filled under undertaking by the issuer to furnish to the U.S. Scentiles and Euchange Commission, upon written sequent of les staff non-accredite d investor pursuant to paragraph (b)(2) of Rule 502.  Signature  Signature		
on undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of far staff non-accredited investor paramet to paragraph (b)(2) of Rule 502.  Issuer (Print (r Type)	<del></del>	
((()), +~~	Date Augu	n 25 2007
Name of Signer (Print or Type)  Robert Fernan der  Yitle of Signer (Print or Type)  Prosident and Chief Executive Officer	<del></del>	

ATTENTION

Intentional mi estatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)